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INTERNATIONAL REVIEW OF THE RED CROSS

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**SUPPLEMENTS
TO THE REVIEW**

SPANISH

Difusión de los Convenios de Ginebra - El Servicio Internacional de Búsquedas (Arolsen) - Vicepresidencia del CICR - Consejo de la Presidencia - Conferencia de expertos gubernamentales - El opúsculo « Derechos y deberes de las enfermeras » - Día Mundial de la Cruz Roja.

GERMAN

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ICRC Medical Mission to the Brazilian Amazon Region

It will be recalled that, with the agreement of the Brazilian Ministry of the Interior and in close collaboration with the League of Red Cross Societies and the Brazilian Red Cross, the ICRC sent a team to Brazil in May 1970 to study the situation and needs of the Amazonian Indians. The team was led by Mr. S. Nessi, ICRC Delegate-General for Latin America, and comprised three doctors, B. Aakerren, S. Bakker and R. Habersang (who were loaned to the International Red Cross by the West German, Dutch and Swedish Red Cross Societies, which agreed also to meet the cost of the expedition) and a Swiss ethnologist, Mr. R. Fürst. They were joined in Rio de Janeiro by Dr. A. Borges dos Santos, a Brazilian Red Cross doctor. As they penetrated deep into the country, we published information on their journey, on the aid that they gave and on the medical centres that they set up¹.

So the members of the International Red Cross medical mission covered some 12,000 miles between May 10 and August 11 1970². They covered six States of Brazil, meeting more than 20 tribes, or about one-third of the Amazonian Indian population³.

Upon their return to Geneva, the three doctors who took part in the mission prepared a report which was published in English. We considered that the following general remarks and the suggestions that went to form the conclusion were worth publication. (Ed.)

¹ See, especially: *International Review*, June, July, August 1970.

² Mr. Nessi arrived back in Rio de Janeiro on 1 June in order to consult with the Brazilian authorities before returning to Switzerland.

³ *Plate.*

GENERAL REMARKS

Any contact with outer civilization experienced by the primitive tribes will automatically release a chain of events that will influence more or less profoundly the life of not only the tribe as such, but also the life of each and every individual of that tribe. This acculturation process can and should be controlled in order to avoid or reduce harmful side effects.

Perhaps the most crucial moment is that of the initial contact. All too often, this is made by people who are not, to our minds, representative of our civilization, or made in a way that is far from optimal. Such prejudiced, biased and imperfect initial contacts should be avoided at all costs. As is being done in some instances in Brazil, contacts should be made by people who have the necessary qualifications to cope with this paramount problem. These considerations have been verified by experiences made by the team, and these experiences have influenced the team as it has tried to approach the needs of the Indians in the Brazilian Amazon basin. We hope that the need for action will be clearly demonstrated by this report.

To understand some of the problems of the present situation of the Indian in the Amazon area, we deem it necessary to give some background information of a more general nature.

The Brazilian Government has established a new administrative region called Amazonia Legal (Article 29 of Law 5.173 of 27 October 1966). It comprises the three states of Acre, Amazonas and Para, that part of the state of Goias lying north of the 13th parallel, the state of Maranhao east of the 44th meridian, the state of Mato Grosso north of the 16th parallel and the Federal Territories of Amapa, Rondonia and Roraima.

The total area of this region is 4,871,487 sq. km with a population of 6.8 millions (1967), giving a population density of 1.4 inhab. per sq. km, compared to an average population density of 10 inhab. per sq. km in Brazil and South America as a whole. This area is equal to 57 per cent of the total surface area of Brazil and 28 per cent of that of the whole of South America. Its population is equal to only 8 per cent of that of Brazil and 4 per cent of that of South America. It corresponds to one-twentieth of the world land

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surface and has one-fifth of the navigable freshwater courses of the earth, one-third of its forested area and a quarter of Brazil's total potential hydroelectric resources. Considering that the world annual forest production is estimated at some 35 billion dollars and that Brazilian exports of such products to Europe and the US are estimated at 5 billion dollars, little more need be said about the potential resources of the Amazon region in this respect.

The Amazon river with its affluents is navigable throughout the year on more than 15,000 km and of these, more than 3,500 may be used by ocean-going vessels. The fact that 10 million hectares of land are flooded each year and receive thus a layer of natural organic fertilizer represents an important reduction in farming costs.

The existence of 90 million hectares of unexploited land suitable for cattle grazing shows again how rich is this region in natural resources. Here, too, may be found a great variety of important minerals. A considerable proportion of the inhabitants live in urban areas such as Belem (550,000), Manaus (250,000), Sao Luiz (215,000), Santarem (112,000), Parintins (34,000) and Itacoatiara (32,000). Many people believe that this provides a good foundation for a dynamic domestic Amazonian market and for the creation of industries that could render the region self-supporting.

These facts must always be kept in the back of one's mind when discussing the future of the Indians. Only in areas of marginal economic interest will the Indian remain in relative freedom that would permit his survival and the preservation of his culture. Ribeiro expresses this in an excellent way¹ . . . "the fundamental determinant of the destiny of indigenous tribes, of the conservation or loss of their languages and cultures, is the national society or even the international economy. The quotation for rubber, nuts and other products on the New York market, or the perspectives of peace and war among the great powers, influence the ebb and flow of the waves of extractors of forest products, permitting the last remaining autonomous tribes to survive or condemning them to extermination".

As a function of this strong movement one can note the extensive network of new roads that have been already built, and are under

¹ In his book *Indians of Brazil in the 20th Century*, page 100.

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construction or are planned in the area. It is evident that some of these roads cut or will cut right into hitherto untouched territories inhabited by more or less completely isolated Indian tribes. From official maps it seems that today the main pressure on the area inhabited by the Indians is from the South, where the creation of the new capital of Brasilia constitutes a new base for the development of the interior of Brazil.

However, before any implementation can be carried out, this decisive factor will have been fully examined and new significant facts brought under consideration.

The ICRC team made considerable effort to identify the official Brazilian long-term policy for its indigenous population.¹ It seems probable that the Brazilian government will make considerable efforts to acculturate its indigenous population. In the light of the enormous potentials in many of the areas now populated mainly by Indians with or without contact with Brazilians, this might lead to the transfer of whole tribes into new areas of lower marginal economic potential. In such areas, Indian closed reservations could be created as has been done in the Xingu and Tumucumaque. In these reservations, the acculturation could then take place under controlled conditions, thus making this process of inevitable integration into the Brazilian society less hazardous, although still not without danger to the Indians. The more it is uncontrolled and rapid, the greater is the risk that the Indian will succumb, not only as a member of a tribal entity, but also as a human being.

It seems, however, that, at the present time, the resources of the "Fundação Nacional do Índio" are inadequate to cope with this vast problem of the integration of the Brazilian Indians in ways that are acceptable from the humanitarian and cultural points of view.

To sum up, we feel that economic interests no doubt will play the major role in opening up the traditional Indian territories of the Amazon region. The Brazilian society will force its way into

¹ Ribeiro uses the following definition of an Indian: "Any individual recognized as a member of a community of pre-Columbian origin, who identifies himself as ethnically different from nationals and is considered indigenous by the Brazilian population with whom he comes in contact". *Indians of Brazil in the 20th Century*, page 105.

new areas and those Indians who will be pushed back and dispersed will undoubtedly come off second best and left without help. Any assistance provided for them must be sufficiently ample to aid them culturally and ethnologically and ensure their health. In many instances this will not be possible on the original site of encounter. An organized migration one way or another into new areas of marginal economic interest might be the only remaining solution. Any such transfer should, however, be done with the utmost care and caution. A basic consideration must be the respect of the Indian as a representative of a highly developed culture but whose frames of reference are different from those to which we are accustomed. In this context it seems appropriate and necessary to point out that our notions with regard to standards of living do not have any bearing on his situation as he lives isolated in his traditional surroundings. It is only as contact is made with the outside world that this notion acquires a meaning. From that time on, however, the raising of the Indians' standard of living becomes the concern of the body assisting them. By this should be understood not only material advantages such as household goods, machines and other industrial products, but also cultural and educational benefits. A higher level in the standard of living implies improvements in quality, and not merely the supply of a larger volume of goods. It should be firmly stated that in our opinion the enjoyment of good health is a necessary prerequisite for any action designed to raise the standard of living of any individual or group of people. In other terms: a good assistance program must contain elements of a plan aiming at the widest possible community development if lasting and meaningful results are to be achieved. The order in which these elements should be introduced must be examined when detailed plans are worked out. The team has seen examples of successful attempts in this direction. The question remains whether the field of any Red Cross action as such should extend beyond that of health.

All sources claim, and the team has reasons to believe such statements to be true judging from its observations, that the rapid decline of Indian populations already contacted is due to disease. This is by no means surprising. Any isolated group would have a low resistance to infection agents which are normally absent in

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its natural habitat. We would recall the devastating epidemic of measles in the Faeroe Islands, Iceland, Greenland and Hawaii and the outbreak of common colds among the inhabitants of Spitzbergen as the first ship arrives in the spring after the long winter they have spent in isolation.

Even diseases that are regarded as relatively mild in Western countries can cause an incredibly large number of deaths. Poor health, due to malnutrition, for example, would also favour the fatal outcome of a disease. For all the reasons mentioned, we are convinced that it is only after having carried out an initial immunization campaign that any kind of long-term assistance in other fields can be given with any chance of success. Other important work related to health is maternal and child welfare, with the emphasis laid on nutrition and health education. It is, however, self-evident that, in order to run a valid nutritional program for Indians with any reasonable hopes for results, it should be combined with an agricultural scheme. This could then, in its turn, procure a higher standard of living as the surplus of any cash crops grown could be sold or exchanged for other necessities of life.

Another important matter to take into account is the high incidence of malaria infections, often highly resistant to standard treatment. The Brazilian government has malaria teams in a number of places in the country but, from our experience, their resources are grossly inadequate. This has to be considered in any future assistance program although it might not be a task for the Red Cross.

Many Indian villages are full of dogs, and this is no doubt an important factor in the spread of a number of diseases. Not only rabies, but also dracontiasis, larva migrans, leishmaniosis, both cutaneous and visceral, leptospirosis, paragonimiasis, salmonellosis, strongyloidiasis, toxoplasmosis and American trypanosomiasis (Chaga's disease) can all be transmitted through dogs, and possibly, also, tuberculosis in areas of high infection prevalence. A health program should therefore tackle the important problem regarding the presence of hordes of dogs; a solution will not be easily found. Of course, many of the diseases mentioned must be fought in other ways, too, if they are to be controlled. Local conditions will determine the method of action.

BRAZIL

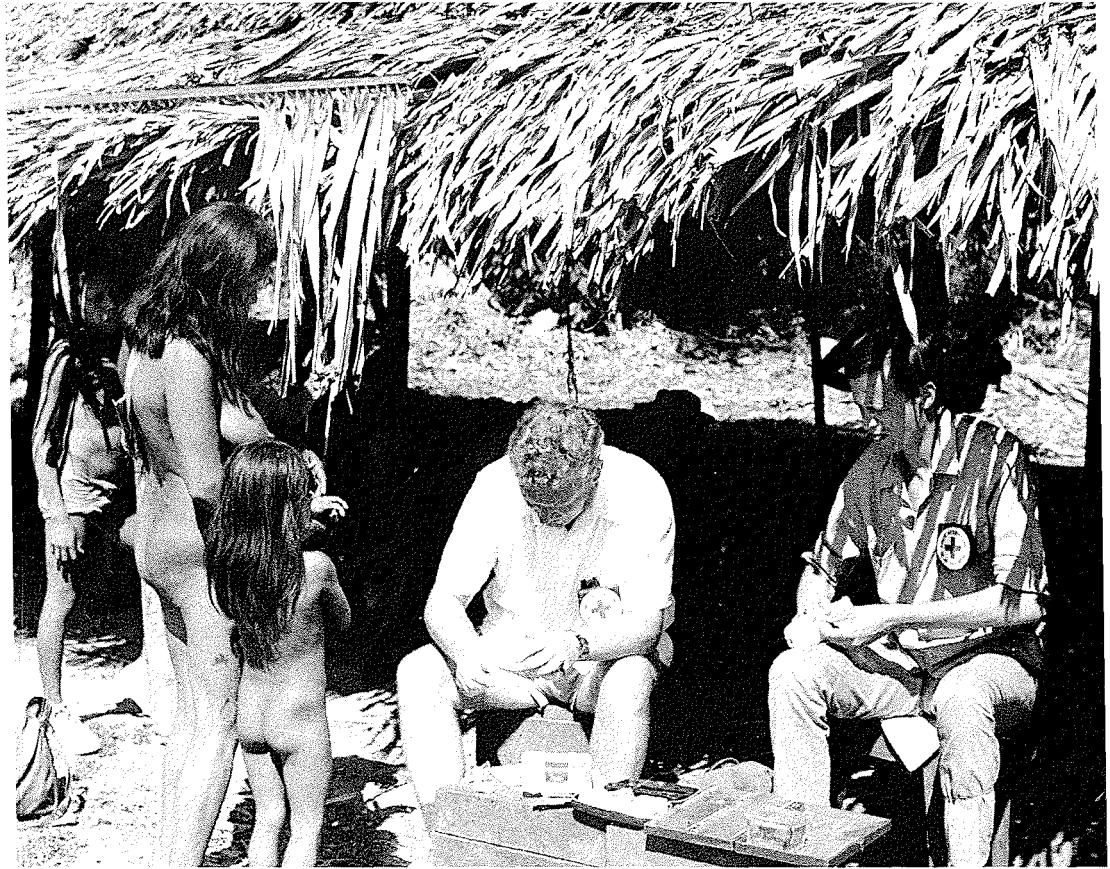


Photo R. Furst

In the Amazon: Doctors of the ICRC medical team take blood samples from members of the Kayapo tribe for measuring the hemoglobin content.



Photo R. Fürs

In the Amazon: a woman of the Bororo tribe with her child.
(June, 1970)

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The migration of large numbers of labourers, especially from the eastern parts of Brazil, into new areas carries with it dangers of national importance: schistosomiasis (bilharzia) is unknown in large parts of the Amazon region, but it is probable that, in many instances, the snail population present in the watercourses of the region could serve as intermediary hosts for the infection agent. This is an important problem that has to be considered should an assistance program be set up. The main responsibility must of course remain on the Brazilian government. The use of latrines, a factor of major importance in the fight against this disease, would also serve to reduce the incidence of hook-worm infection, which is the cause of considerable disability in persons affected.

A matter of concern is the fact that in some areas of the Amazon region, for example, in the neighbourhood of Vilhena, the soil, consisting of only a very thin layer of organic earth on top of fine quartz sand, is not suitable for agriculture in the modern sense. The intensive cultivation of such areas could easily end up in the formation of large desert areas, quite uninhabitable, and as it seemed to the team that the authorities were not fully aware of this particular danger, it felt that it had to be mentioned.

Assuming that official policy in Brazil aims, as we believe, at the integration of the Indian population, this, in most instances, can only be done if the Indians are given assurances that the land they live on will be their own and for their use in a foreseeable future. Any transfers to new areas must be acceptable to the tribes concerned and their members should be brought to understand the necessity for the transfer. In order to safeguard the Indian population, land purchases or long-term leases will have to be arranged.

Though it is fairly simple to state some of the needs of the Brazilian Indians, it is most difficult to suggest methods to meet them. The vastness of the area where they live and its low population density, both Brazilian and Indian, are the first obstacles to be overcome. It has however been done, for instance, in parts of Peru¹. A health protection program for the Indian population of the Brazilian Amazon region must also take into account the health problems of the groups with whom they come into contact, such as settlers, caboclos migrating labour and the like.

¹ See *World Health*, WHO, Geneva, July 1970.

SUGGESTED METHODS OF ASSISTANCE

All programs of assistance should be co-ordinated with efforts made by Brazilian authorities and the Brazilian Red Cross, with the aim of handing over, after no more than 10 years, to the national organs to continue and/or extend the program should this be considered desirable. Therefore training of local personnel is essential.

The team feels it is wise once more to stress the importance of the time factor. With no, insufficient, or misdirected assistance, there will shortly be no Indian problem to solve. All efforts should therefore be made to get started early at points where the danger is greatest and then move forward as fast as possible. The drawing up of priorities is thus of the greatest importance. We feel that for an assistance program with the objectives stated in this report they should be the following:

1. Control of contacts (mainly a government responsibility)
2. Allocation of protected land (government responsibility)
3. Immunization (measles, smallpox, tuberculosis, influenza)
4. Health education (food habits, use of latrines)
5. Agricultural training
6. Establishing of basic curative medical services.

The team suggests that the area should be divided into five sectors, each containing approximately the same number of Indians. These areas should be attended to in order of urgency.

As has been already pointed out, this should not be taken as the final possible suggestion. The recommendations are given, judging from the state of knowledge available at the time the expedition was carried out. If there were to be changes in the program of the Amazon region, they could, and of course should, influence the priorities decided upon.

If the pilot project proves to be satisfactory and if a similar program is started in other regions, then it might be a practical proposition to use Manaus as a central base for the whole program.

We would stress once again the need for fast action. The extent of the program, geographically as well as where priorities are concerned, will of course depend on the amount of money available.

INTERNATIONAL COMMITTEE OF THE RED CROSS

REAFFIRMATION AND DEVELOPMENT OF INTERNATIONAL HUMANITARIAN LAW APPLICABLE IN ARMED CONFLICTS

CONFERENCE OF GOVERNMENT EXPERTS

In its issue of April 1971, *International Review* printed an account of the Conference of Red Cross experts convened by the ICRC that had taken place at The Hague, in co-operation with the Netherlands Red Cross, from 1 to 6 March 1971. A report on its work was submitted to the Conference of Government Experts on the Reaffirmation and Development of International Humanitarian Law, it, too, convened by the ICRC, which opened in Geneva on 24 May 1971.

Over two hundred experts, delegated by 41 governments, are taking part in the Conference. At the official opening ceremony, addresses were delivered by Mr. Marcel A. Naville, President of the ICRC, Mr. Willy Donzé, President of the State Council of the Republic and Canton of Geneva, and Professor Willem Riphagen, Director of the Legal Department of the Royal Netherlands Ministry of Foreign Affairs. Extracts from their speeches are given below.

*

After recalling the studies in the legal field that the ICRC had carried out, and showing that the present Conference of Government Experts marks an important stage in the work pursued for the benefit of victims of war in all its different forms, the President of the International Committee welcomed Mr. Marc Schreiber, representative of the United Nations Secretary-General, and his colleagues taking part in the Conference. He then continued:

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I would also express my gratitude to the States which have responded to the ICRC's appeal by delegating to this conference experts whose advice, coming from people so competent, will be essential for our progress on the course we have set. The ICRC looks upon their attendance as a proof of their interest and confidence, of which it is most appreciative. Indeed, without the active support of governments, the mission it has undertaken could not be brought to a successful conclusion. By delegating experts to this conference, your governments discounted all political or diplomatic considerations and, to avoid placing the success of the meeting in jeopardy, they have abstained from raising any question of the relationships among themselves. We thank them warmly. I would also like to avail myself of this opportunity to confirm that the ICRC's invitation to governments whose experts are present here does not in any way imply a standpoint or opinion on any government's past or present attitude concerning humanitarian law and the implementation of the Geneva Conventions in particular cases.

This seems the proper place to restate that this conference is first and foremost an opportunity to consult specialists and to exchange views in order the better to highlight questions, suggest answers, and find methods of practical application. Only the appointed experts, and the representatives of the United Nations Secretary-General and of the ICRC will therefore attend the meetings.

In view of the nature of the consultation, there could be no question of inviting all governments to send experts; that would have made discussion almost impossible. It was for that reason that the ICRC, in accordance with the directives of the XXIst International Conference of the Red Cross, drew up a list of governments representative of the main legal and social systems throughout the world, bearing in mind at the same time the active interest which several governments had displayed in the undertaking. Nevertheless, the opinions of governments which have not sent experts will, of course, be welcomed with interest and gratitude by the ICRC.

...Ladies and Gentlemen, the undertaking in which you are going to participate is an act of faith in the value and the rule of law. It is the coming generation which will bear the responsibility for deciding whether unbridled violence shall prevail or law shall supplant brutality and ensure respect for the demands of humanity. In this

work we must be realistic, and law must follow up events closely, otherwise there is a risk of raising only a semblance of humanitarianism from which nothing useful may be expected. It is not possible, and it would be absurd, to close our eyes to contemporary realities and antagonisms which separate so many human communities. But neither must we forget that the legal structure for which many of us have been working for so many years and of which one of the most decisive phases will begin in the next few days, must be planned in terms not only of the situation today, but also of that of tomorrow. Humanitarian law must undoubtedly be effective immediately, but it must especially be applicable in the future when the political, social and military systems which we know today may have changed radically. Let us therefore broach our proceedings with that objectivity which alone permits the creation of a lasting structure.

It has been said that scientific probing into the future is not the foretelling of probabilities but the preparation of a desirable future, and perhaps even more, the endeavour to make the desirable future a probability. It is up to you to demonstrate foresight in a field from which mankind awaits results with impatient anxiety.

*

The President of the State Council, on behalf of the Geneva authorities, welcomed those taking part in the Conference. He recalled the events which, in the nineteenth century, had preceded the foundation of the Red Cross, the development of which he described as one of the principal events by means of which Geneva asserted its international vocation. Showing that, together with the efforts to protect the human person, there had always been, too, the will to defend peace and to study the measures the purpose of which was to attain peace, he concluded with the following words:

...A realistic view of the problems facing the international community has led it to carry on its search for peace simultaneously on two planes: to prevent armed conflicts, by seeking a solution to the profound causes of war and by employing the channels of diplomacy

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and arbitration; but also, in the presence of such conflicts, to improve the protection of victims, by fighting for the elimination of needless suffering.

... There is no doubt that your debates will be animated with that realistic spirit, desirous to reach concrete solutions for the strengthening of that protection as speedily as possible. I, therefore, on behalf of the Geneva authorities, express to you my best wishes for the full success of your deliberations.

*

The representative of the Netherlands Government, Mr. Riphagen, first paid tribute to the Red Cross, a "unique and priceless entity". He then said that, in his mind, there existed no doubt that the universal recognition and protection of the human being as such represented the main line of force in the development of international law in the nineteenth and twentieth centuries.

... There is also, alas!, no doubt that war involving States, and more generally armed conflicts between opposing factions, continue to threaten the world, endangering the life of the individual and, at times, the very foundations of human existence.

In the face of this formidable clash between reality and aspirations, the international community is endeavouring to find a solution or, at least, a compromise. One of the means of accomplishing this difficult task, namely the humanization of armed conflict, is of enormous importance.

... Armed conflicts are today increasingly varied in form and affect ever greater numbers of people.

In other words, the task which the Red Cross has set itself has become both more urgent and more difficult.

Mr. Riphagen concluded: *The weeks to come will, we hope, enable us to conceive more clearly the lines along which the effort may be continued to supplement existing humanitarian law by new international legal instruments. If necessary, it is planned to hold consultations with government experts at a later date.*

The Istanbul Resolution mentioned earlier also provides for the submission of proposals to governments as well as for one or more diplomatic conferences.

After these preliminaries, allow me to express my government's earnest hope that our Conference's work will reveal the general determination of the States represented here to promote the development of humanitarian law applicable in armed conflicts and thereby contribute to the bringing about of the conditions necessary to justify the convening of a diplomatic conference in the not too distant future.

* * *

At the first plenary meeting, the Conference elected Mr. Jean Pictet, Vice-President of the ICRC, as its Chairman. Mr. Riphagen (Netherlands), Mr. Cristesco (Rumania) and Mr. Gonzalez-Galvez (Mexico) were elected Vice-Chairmen.

After a general discussion, the Conference formed four committees. These are being chaired by Mr. Singh (India), Mr. Lee (Canada), Mr. Dabrowa (Poland) and Mr. Gonzalez-Galvez (Mexico). The first committee is studying the "protection of the sick and wounded", the second the "protection of victims of non-international armed conflicts" and the "rules applicable in guerrilla warfare", and the third the "protection of the civilian population against dangers of hostilities" and the "rules relative to behaviour of combatants". The fourth committee, which had not originally been envisaged, is dealing with "measures intended to reinforce the implementation of the existing law"; the importance of this subject was stressed by many delegations during the general discussion.

As we go to press, the committees are continuing their work. The points covered will be taken up in plenary session until the end of the Conference on 12 June.

*EXTERNAL ACTIVITIES***ICRC President in the United States**

In response to an invitation from the American National Red Cross, Mr. Marcel A. Naville, President of the ICRC, accompanied by senior ICRC officials, went to the United States from 17 to 24 April 1971.

In Washington, Mr. Naville was received by President Nixon at the White House;¹ Mr. Henry Kissinger, Mr. Nixon's special assistant, was also present. Mr. Naville also met Secretary of State William P. Rogers and Secretary of Defence Melvin R. Laird.

The ICRC President next went to New York where he had talks with H.E. Ambassador Ervard Hambro, President of the United Nations General Assembly. Mr. Naville was also received by U Thant, Secretary-General of the United Nations, and senior United Nations officials.

In the course of these various talks, in Washington and in New York, the main international problems were reviewed, in particular that concerning prisoners of war and the protection of the civilian population in the Vietnam and Middle East conflicts. The work carried out by the ICRC throughout the world and the development of international humanitarian law were also at the centre of the discussions.

Mr. Naville visited American Red Cross facilities and premises and was received by Mr. Roland E. Harriman, Chairman of the National Society, as well as by Mrs. Francis E. Hildebrand, National President of Volunteers, and by Mr. Kenney and Mr. Evens,

¹ *Plate.*



Mr. Nixon, President of the United States, receives the ICRC President, Mr. Naville, at the White House.

Washington

Mr. M. A. Naville welcomed at American National Red Cross headquarters by Mr. G. M. Elsey, President of the National Society.





Washington: The President of the ICRC speaking to members of the American National Red Cross at National Society headquarters.

Quito: Members of the Ecuadorian Red Cross Executive Committee (centre, Dr. M. A. Itturalde, President of the National Society) standing in front of the mobile clinic donated by the ICRC.



respectively Presidents of the Columbia and Grand New York Local Chapters. The President of the ICRC had useful meetings with the President of the American National Red Cross, Mr. George M. Elsey,¹ and with Vice-Presidents Ramone S. Eaton, Robert Lewis, Fred Laise and Robert Shea.

Mozambique

From 11 to 30 April 1971, Mr. P. Zuger, ICRC delegate, and Dr. E. Leuthold, doctor-delegate, visited ten places of detention in Mozambique. They saw political detainees (interned on administrative grounds) in prisons and internment camps and were able to talk with prisoners of their own choice without witnesses. In addition, they visited four hospitals where sick detainees were being tended. As customary, and the same applies to the visits mentioned below, the ICRC reports are sent to the detaining power.

Rwanda

On 23 April 1971, the regional delegates of the ICRC for Eastern Africa, Mr. R. Santschy and Mr. R. Weber, went to Rwanda where they visited political detainees held in a prison. They distributed toilet requisites and talked with prisoners of their own choice without witnesses.

Nicaragua

Continuing his mission, Mr. E. Leemann, delegate of the ICRC, went to Nicaragua, where, from 19 to 24 April, he visited about thirty persons held for political reasons or offences in nine prisons.

Panama

Mr. Leemann next went to Panama. With the approval of the authorities, he visited three prisons, from 3 to 11 May, and, as in Nicaragua, talked with detainees without witnesses.

¹ *Plate.*

Ecuador

The ICRC has donated a mobile clinic to the Ecuadorian Red Cross. The Executive Committee of the National Society, led by its President, Dr. Miguel A. Iturralde, took delivery of the vehicle at Quito on 20 April 1971 ¹.

The mobile clinic will be of great help to the National Society for the extension of its relief work in rural areas and for the development of the medical activities which it is carrying out in co-operation with the competent authorities. It is specially equipped for vaccination campaigns and contains for that purpose a refrigerator and sterilization apparatus, as well as a complete first-aid kit.

Ceylon

Following the events which took place in Ceylon, the authorities of the island and the Ceylon Red Cross put forward to the International Committee a suggestion for a mission to be sent out.

A delegate of the ICRC, Mr. Roger Du Pasquier, left Geneva on 25 April for Colombo, arriving two days later in that town. He visited there several hundred persons who had been arrested in connection with the disturbances and were held in Colombo Prison. He next went to four of the capital's hospitals where he saw wounded civilians and soldiers as well as wounded rebels who had given themselves up to security forces. On 5 and 6 May, he went round several places in the country, accompanied by representatives of the authorities and members of the National Society, and visited prisons and hospitals in Kandy, Kegalle and Anuradhapura.

The main problem regarding relief concerns stocks of medicaments which were exhausted in a few days. Hospitals are in urgent need of blood plasma, anaesthetics, dressings, antibiotics and babyfood. A first list of requests, to the value of over one million Swiss francs, was despatched by Mr. Du Pasquier to the ICRC in Geneva. To meet this request, the ICRC got in touch with a number of governments, and, on 7 May, was informed by

¹ *Plate.*

the Federal Republic of Germany that a first consignment of 2.5 tons of medicaments, including 2,000 bottles of blood substitute, had been despatched to Ceylon from Bonn.

The Ceylon authorities and Red Cross expressed the wish that lists of relief supplies should be centralized at the ICRC in Geneva and that consignments should also be sent through the ICRC so as to avoid unnecessary duplication.

The ICRC delegate also suggested that a bureau to trace missing persons should be set up in Ceylon. Accordingly, several copies of the handbook "How to set up a Tracing Service"¹ were immediately despatched to Ceylon, together with a number of printed enquiry forms and family messages.

Republic of Vietnam

During these last few weeks, the delegates of the ICRC in the Republic of Vietnam visited several places of detention: the prisoner-of-war camps at Qui-Nhon, Pleiku and C  n-Tho; the correctional institutions at Mac-Hoa, C  n-Tho, Tuy-Hoa, My-Tho, H  i-An, Gia-Dinh, Tam-Ky, Quang-Long, Phan Thi  t, Dalat, Bi  n-Hoa, Ban-M  -Thu  t, Kontum, Bach Gia and Phu-Cuong; the Vietnamese Armed Forces Military Hospitals at Tay-Ninh, C  n-Tho, Quang-Ngai, Hu   and Ban-M  -Thu  t; and the American Armed Forces Military Hospital at Long Binh.

In some of the correctional institutions, the delegates distributed toilet requisites and medicaments. In addition, they carried out medical examinations of certain detainees.

Near East

Reuniting of families.— During the last few weeks, two operations for the reuniting of families were carried out by the ICRC: the first, involving inhabitants of the occupied territories of Gaza-Sinai and those of the United Arab Republic, took place on 27 April 1971 at El-Qantara on the Suez Canal. In all, 114 persons crossed to the west bank of the Canal and 26 to the east bank.

¹ See *International Review*, March 1971.

The second operation took place on 5 May at Kuneitra. It enabled twelve persons to join their kin on the occupied Golan Heights.

Israel and the occupied territories

ICRC delegates visited, on 2 and 16 May 1971, 112 Arab prisoners of war in Israeli hands. They comprise 72 prisoners from the United Arab Republic, 39 Syrians and 1 Jordanian. On 6 May, they saw in the hospital where he is under treatment a wounded Syrian prisoner of war and, in another hospital, the same day, a Lebanese civilian, also wounded.

Lebanon

The delegate of the ICRC visited, on 1 May 1971, an Israeli held in a Beirut prison.

United Arab Republic

The ICRC delegates visited, on 4 May 1971, the 9 Israeli prisoners of war held in the Abassieh Military Prison and, on 5 May, the two wounded Israeli prisoners of war lying in a Cairo hospital.

*IN GENEVA***ICRC VICE-PRESIDENCY**

The International Committee of the Red Cross has nominated Mr. Jean Pictet and Mr. Harald Huber to be Vice-Presidents for 1971 and 1972 as from 1 July 1971.

PRESIDENTIAL COUNCIL

The International Committee of the Red Cross has elected Mr. Max Petitpierre and Mr. Victor Umbricht to be members of the Presidential Council for 1971 and 1972 as from 1 July 1971; they will sit with the President and the two Vice-Presidents mentioned above, who are ex-officio members of the Council.

New Member of the International Committee

In plenary session on 6 May 1971, the International Committee of the Red Cross welcomed Mr. Pierre Micheli, whom it had nominated as a member at a previous plenary session.

Mr. Micheli was born in Geneva in 1905, studied at the universities of Oxford, Berlin and Geneva, and has a degree in law. In 1933, he joined the Swiss Foreign Affairs Department and has since represented Switzerland in a number of countries, as consul and later as counsellor of legation. In 1952, he was appointed Head of the International Organizations Division in the Foreign Affairs Department at Berne, with the rank of minister plenipotentiary.

After having taken part in a great number of international conferences, as a member of delegations and also at their head, he was nominated Minister of Switzerland, and later Ambassador, in France. In 1961, he was appointed Secretary General of the Foreign Affairs Department and Head of the Political Affairs Division, a post which he occupied until 1970.

Throughout his career, Mr. Micheli had many opportunities to become familiarized with the work of the Red Cross. In particular, he was Secretary General of the Diplomatic Conference that met in Geneva in 1949, at the issue of which the four Geneva Conventions were signed.

By his long experience, his deep comprehension of the realities of life and his knowledge of Red Cross problems, Mr. Pierre Micheli will furnish a worthy contribution to the work of the International Committee, which is most happy to be able to count straight away on his valuable co-operation.

For victims of pseudo-medical experiments

The Neutral Commission appointed by the ICRC to decide on applications by Polish victims of pseudo-medical experiments in Nazi concentration camps during the Second World War, met on 30 April, 1 May and 4 May 1971 at ICRC headquarters in Geneva. It consisted of Mr. W. Lenoir, President, a judge of the Geneva Court of Justice, Dr. S. Mutrux, assistant director of the Bel-Air psychiatric clinic in Geneva, and Dr. P. Magnenat, Dean of the Faculty of Medicine and assistant at the Nestlé Hospital university clinic at Lausanne.

The Neutral Commission awarded 91 victims whose claims were found to be justified indemnities totalling DM 2,530,000. The total amount of the assistance which the Government of the Federal Republic of Germany has paid to Polish victims of pseudo-medical experiments on the basis of the Neutral Commission's decisions has now reached the sum of DM 28,540,000.

DISSEMINATION OF KNOWLEDGE OF THE GENEVA CONVENTIONS

In its preceding issue, International Review had announced, after publishing the text of two letters in which the ICRC drew the attention of National Societies to the importance of an ever-wider diffusion of the Geneva Conventions, that a further letter would be printed relative to University courses on international humanitarian law. This runs as follows:

In its circular sent in January 1971, the International Committee of the Red Cross had the honour to inform you, in a provisional account, of the action undertaken by some thirty National Societies in the important realm of the dissemination of knowledge on the Geneva Conventions, consistent with resolution IX adopted by the XXIst International Conference of the Red Cross at Istanbul.

Although many governments and National Societies have taken steps to diffuse the Conventions among their armed forces, National Society members, school children and the public in general, it also appears advisable that humanitarian law be systematically taught in universities. The general increase of violence, the escalation of conflicts of all types and the terrifying advance of military technology make it necessary that an increased effort be made to disseminate the principles of the Red Cross and the Conventions in all sectors.

Experience has shown, indeed, that it is essential that all who, for one reason or another, are required to apply the Geneva Conventions should first know them as accurately as possible.

The International Committee has already suggested that humanitarian law should be taught in university faculties of law,

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political science and medicine. Various documents have been published to that effect, of particular note among them being the "Course of Five Lessons" on the Geneva Conventions.

Efforts in this field have already produced some result, several faculties of law having included courses on humanitarian law in their programmes. Geneva University has even founded a Chair of International Humanitarian Law to which Mr. Jean Pictet, Vice-President of the ICRC and Chairman of the Legal Commission, has been appointed.

Moreover, at the Conference of Red Cross Experts on the Reaffirmation and Development of International Humanitarian Law, which met at The Hague from 1 to 6 March last,¹ the ICRC observed with pleasure that the National Societies, too, realized the pressing need to intensify the diffusion of the Conventions which should henceforth be taught more thoroughly at all levels. In this respect renewed effort is called for, particularly among the armed forces, young people and university students.

This year, the interest aroused by the development of humanitarian law and by the various conferences of experts to promote the study thereof offers a noteworthy opportunity to draw the attention of universities to these problems and to interest professors in this branch of law.

For that reason, the International Committee urges all National Societies to examine ways and means of introducing or developing the study of humanitarian law in general and of the Geneva Conventions in particular in their countries' universities. For that purpose, National Societies must be able to count on the assistance of their governments, since the four Geneva Conventions contain provisions according to which the signatory States undertake to introduce the study thereof in their programmes of military and civil instruction.²

In order to render this new project more easily and systematically attainable, we have drawn up two questionnaires. One is intended for National Societies, and the second for universities.

¹ See *International Review*, April 1971.

² Articles 47 of the First Convention, 48 of the Second, 127 of the Third and 144 of the Fourth.

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The first of these questionnaires is general in nature and is designed to obtain the opinions and suggestions of National Societies concerning our project.

The National Societies which agree to give us their active support—and we hope they will be many—are requested to contact their countries' universities to submit them the second questionnaire which, as said above, is intended for them. This second questionnaire is to find out what the universities are already doing in this branch and what else they would be prepared to do.

On the basis of replies, we shall carry out a comparative study and report to all National Societies and universities which so wish. This study will permit the National Societies to continue discussions with the universities, to bring to their attention what is being done elsewhere, and to suggest further action. In case international humanitarian law is not taught in your country, would you please state this in the questionnaire.

To enable you to sustain the interest of universities which are prepared to study our suggestion, we attach hereto a brief bibliography¹ of writings on international humanitarian law which might provide a basis for teaching courses. Needless to say, we shall at any time be willing to indicate any other literature which might be of use to professors and students.

* * *

¹ A list of publications on the Geneva Conventions and Red Cross Principles is annexed to the letter.

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QUESTIONNAIRE TO RED CROSS, RED CRESCENT AND RED LION AND SUN SOCIETIES

1. Does your Society share the ICRC view as to the importance and necessity of teaching international humanitarian law, in particular the Geneva Conventions, at university level?
2. Is your Society prepared to support this scheme and take the necessary steps to discuss its implementation with the universities, higher institutes and relevant authorities of your country?
3. If so, please indicate names and addresses of universities and institutes that you intend to contact.
4. In what way do you propose to do this (in writing, or through meetings) and how could the ICRC be of assistance?
5. If you yourselves are reluctant to take these preliminary steps, do you think that the ICRC should do so?
6. If so, please give names, positions and addresses of the appropriate persons with whom you suggest we should get in touch.

*

QUESTIONNAIRE TO UNIVERSITIES

The purpose of this questionnaire, devised by the International Committee of the Red Cross in Geneva, is to determine the importance given today to the teaching of international humanitarian law, in particular the Geneva Conventions, in universities.

It is the earnest desire of the ICRC to see this subject taught on a more extensive scale, and the comparative survey that will be made of the replies coming in will permit to find out more precisely how, and in what direction, the diffusion of this branch of international public law must develop.

I. Present state of the teaching of international humanitarian law

1. Please list below, by faculties, the subjects where the Geneva Conventions are studied, stating whether they are compulsory, or optional, or may be taken as an extra subject.

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2. How many hours are devoted to the study of international humanitarian law, in particular the Geneva Conventions, in each of the subjects mentioned?
3. How many students are there this year attending lectures in these subjects?
4. Is there an examination paper on the Geneva Conventions?
5. Are the following basic books and publications available to students in your library?
 - The Geneva Conventions of August 12, 1949.
 - The Commentaries on the Conventions in 4 volumes.
 - Handbook of the International Red Cross.
 - The *International Review of the Red Cross* (monthly).
 - Course of Five Lessons on the Geneva Conventions (edited by the ICRC).
 - Red Cross Principles, by Jean Pictet.
6. If you have not got some of the above books, kindly mark a cross on the attached list against the titles of those you would like to have.
7. Do you know of any thesis or other studies on international humanitarian law that have been presented in the course of the past few years?

II. Development of the teaching of international humanitarian law in universities

1. Do you believe that the creation of a chair in international humanitarian law would be warranted in your country?
 2. Do you consider that it is possible to develop the teaching of international humanitarian law in your University?
 3. If so, when and how?
 4. Are you of the opinion that a scholarship or a prize awarded to the best work on a subject of international humanitarian law would stimulate students to take increasing interest in this field?
 5. Would you like to receive a copy of the comparative survey that the ICRC will make on all the replies to this questionnaire that will be sent in?
-

AROLSEN

The International Tracing Service

In its issue of March 1971, the International Review printed an article describing the two principal tasks pursued today by the Central Tracing Agency in Geneva: to maintain links between prisoners and their families, and to trace persons who have disappeared or have been separated from each other as a consequence of various events (international conflicts, civil wars, internal disturbances).

For over a hundred years, the Agency's card index has continued to expand and today contains 45 million cards. During the previous year alone, more than 45,000 requests and other mail items were received and 43,500 sent. In addition, over 10,000 files were closed; positive results were obtained in nearly half of these cases.

The sheer volume of these figures and the number of replies received should not make us overlook the splendid work carried out at Arolsen by the International Tracing Service. It is twenty-five years since it was set up. In June 1955, its management was entrusted to the International Committee of the Red Cross and today it comprises a staff of 250 persons.

It gives us pleasure to print the following article, from the pen of Miss Françoise Bory, of the Press and Information Division of the ICRC, who has recently visited Arolsen.

* * *

The applicant was a Belgian woman who had been deported more than 25 years earlier during the Second World War. She was applying for a certificate that she had been interned in a concentration camp, so that she might obtain compensation. Her application was made to the International Tracing Service (ITS) at Arolsen in the Federal Republic of Germany. In this cheerless building on the edge of a romantic park are stored the records of the concentration camps.

The employee assigned to the case consulted indexes, files and lists, a tedious task which often demands weeks of effort. He was to find that according to the records the woman had been detained successively in the Auschwitz, Flossenbürg and Mauthausen camps and was released from the latter at the end of the war. The service was therefore able to issue an official certificate attesting to her detention in concentration camps and with that certificate she could claim the indemnity to which she was entitled.

Such requests are received by the hundred each day at the ITS. They constitute the main part of the work of this organization which is unique and which we shall now consider more closely.

The origin of the ITS

Immediately after the Second World War, the need was felt to centralize the concentration camp records and to keep up-to-date card indexes on former detainees. The innumerable requests for information on missing persons gave support to the idea. The Central Tracing Bureau was therefore set up in 1946 and operated by UNRRA (United Nations Relief & Rehabilitation Administration).

In 1948 the Bureau changed its name to the International Tracing Service (ITS). Its headquarters was located at a point where the four occupation zones meet, in Arolsen, a small eighteenth-century town some 35 miles from Cassel, in Hesse.

The ITS was then taken over by the International Refugee Organization (IRO). Four years later, when that organization was disbanded, it was managed by the Allied High Commission for Germany.

When, on 5 May 1955, the occupation ceased, it was decided that the management of the ITS would be entrusted to a neutral and independent organization. The International Committee of the Red Cross was well suited to discharge such an assignment. The 1955 agreements entrusted it with that mandate and also required it to appoint and remunerate the director. An international commission was set up to maintain co-operation among the countries concerned and conserve the records.

The work of the ITS

This is defined in the 1955 agreements as:

“ To trace missing persons, to collect, classify, preserve and render accessible to governments and to interested individuals all documentation relative to German and non-German nationals who have been detained in National-Socialist concentration or labour camps, or to non-German nationals displaced as a result of the Second World War ”.

Today the search for missing persons is hardly 5% of its work which consists mainly in replying to applications for certificates attesting to detention in concentration camps or for death certificates, with a view to seeking compensation for persecution or injury, exit visas or naturalization. Official certificates are necessary also to claim restitution of property seized by the nazis and for probate of wills or the claiming of pensions.

The deaths recorded in the concentration camp documents are legalized by a special office for death registration (Sonderstandesamt) which is also in Arolsen. So far, it has legalized 343,661 death certificates.

Despite the passing of the years, the number of inquiries reaching the ITS remains high. There was a slight increase in 1954, following the entry into force in the Federal Republic of Germany of the indemnity law in 1953, but the figures have varied only slightly since then, as shown in the following table:

<i>year</i>	<i>inquiries</i>	<i>replies</i>
1945	52,258	—
1946	244,179 *	47,589
1947	58,252	47,057
1948	48,121	38,580
1949	83,419	59,768
1950	33,451	65,330
1951	51,619	61,338
1952	53,095	61,889
1953	67,110	85,108

* A large part of these inquiries were forwarded to National Red Cross societies.

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<i>year</i>	<i>inquiries</i>	<i>replies</i>
1954	103,363	171,765
1955	137,607	238,169
1956	158,439	236,523
1957	203,801	358,842
1958	154,581	383,023
1959	125,871	320,072
1960	114,900	271,887
1961	128,465	186,311
1962	154,988	200,387
1963	100,799	158,498
1964	197,805	208,219
1965	129,701	271,217
1966	155,981	227,682
1967	160,589	242,304
1968	142,727	205,976
1969	174,473	218,867
1970	123,329	169,106
	3,158,923	4,535,507

A vast amount of documentary material

The ITS archives are divided into three categories: concentration camp documents, wartime documents, post-war documents.

Concentration camp documents.—More than 3 million original documents are filed in this section. Unfortunately many records were destroyed when inmates were released from the concentration camps. For some, such as Buchenwald and Dachau, the records are almost complete; others are only 80% or 50% covered, and some camp records are completely lost. It happens however that records are recovered and find their way to the ITS. "We received four years ago a list of 47,000 persons deported to Stutthof", Mr. A. de Cocatrix, Director, told us. "It was a stroke of luck, as until that time we had no documents concerning that camp. We were thus enabled to reply to many inquiries which hitherto we could not answer".

The records consist of lists carefully drawn up by the German authorities. Everything concerning a detainee during his captivity was scrupulously noted: forced labour, transfers, sickness, release

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or death. Some former detainees owe their certificates of "incarceration" in concentration camps to the number of lice which plagued them! Who would have thought that, twenty-five years later, this degrading vermin would permit unrecorded detainees to obtain an indemnity?

Wartime documents.—These relate to foreigners living on German territory during the war but not interned or imprisoned. These files were compiled shortly after the hostilities, by order of the occupation authorities. They consist essentially of records of payment of social insurances premiums.

Post-war documents.—These concern the thousands of persons who were displaced between 1945 and 1951, especially in the German and Austrian Western zones of occupation. The information, most of which was drawn up by UNRRA and the IRO, is necessary to obtain exit visas and naturalization papers. A special section has been set up to seek children separated from their parents during the hostilities.

The Central Index

It might well be asked how, in all these documents, one can find one's way about. For that purpose the ITS has a central index: thirty million index cards containing brief references of all documents and concerning nearly ten million people.

This impressive index is based on the alphabetical-phonetic system. It seemed impossible to compile an index based on nationalities or residence. It was therefore necessary to have index cards with names. There again there was a problem: how to identify a case among the various ways of spelling the name? For instance, by the phonetic system the name Schwarz can be filed on a single card no matter which way it is spelt—and there are 144 variants. A special index was compiled for christian names. These sometimes change completely from one language to another: Wolfgang in German becomes Farkas in Hungarian, Lupu in Rumanian, Seev in Hebrew and Kurt in Turkish!

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Cases are not easy to deal with. In spite of the precision of the German administration at the time, names were spelled in several different ways, apparently at whim, when detainees were transferred. Nevertheless, by dint of research, deduction and cross-checking, the ITS employees find the key to the puzzles they have to solve. "Each of them is something of a detective", said Mr. de Cocatrix with a smile. And it is true. It is only thanks to that fact that different names can be proved to concern the same person, for example when the Polish name Grumnicki becomes successively Grumicki, Groniki, Grominsky, Brninzki. It is obvious when it is known, but it is not always easy to find.

The ITS employees are as busy as bees. In their quiet offices, day after day, they apply their intelligence, tenacity and hope to the remedying of physical and moral injury to millions of victims, inflicted a quarter of a century ago. The ITS is seldom talked of. Its work is enormous, whether viewed statistically or from the human angle, and the modesty of the staff calls for admiration. Just one case in point is that of the Ukrainian speaking six languages and specializing in difficult cases which others would have consigned to the "negative results" files yet for which, thanks to his perseverance and flair, he finds the answers; it is always a sore point with him not to reach a result for all his files!

It is thanks to such a spirit that thousands of victims today find some compensation for their sufferings.

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WORLD RED CROSS DAY

Each year, 8 May is celebrated as International Red Cross, Red Crescent and Red Lion and Sun Day. In 1971, it was celebrated with great verve and the heads of international Red Cross institutions issued a message in which they explained the significance of the theme chosen:

Mr. Marcel A. Naville, President of the ICRC:

In the world we live in, the state of war is a permanent feature. One conflict ends, another breaks out. Civil wars, disturbances, internal tension can, sometimes in a few hours, crush thousands of people under the heel of oppression, captivity and occupation. What words, therefore, could better describe the mission of the International Committee of the Red Cross, whose specific field of action is war, than the theme chosen to celebrate 8 May this year: "Red Cross Working Round the Clock"?

The Red Cross must never cease its relentless efforts. Despite the obstacles, the opposition and the difficulty of gaining acceptance everywhere for the humanitarian standards laid down in the Geneva Conventions, it is comforting to note that the trust placed in the Red Cross is steadily increasing. More and more it is likely to be reckoned with and relied on, above all when peace must be preserved.

Such vast undertakings under the Red Cross emblem would hardly be possible were they not based on that impressive legal instrument, the Geneva Conventions. They have greatly improved conditions for a number of categories of war victims. Nevertheless, we must realize that, in spite of the extensive development of these Conventions in 1949, they are inadequate at times in the face of the new situations arising in contemporary conflicts.

Mandated by the last International Conference of the Red Cross and with the full support of the United Nations, the ICRC therefore initiated two meetings this year, one of Red Cross experts held recently

in The Hague, and the other of Government experts, to open in May in Geneva. Their aim is to begin to draw up new rules extending wider protection for victims of conflicts.

The Government experts, from all parts of a tragically divided world, will, we are certain, like those of the Red Cross, be able to put aside their differences in the common desire to limit the field of human misery.

This active solidarity in the face of suffering expresses the very spirit of our movement. May this year's 8 May provide yet another such shining example.

Mr. José Barroso, President of the Board of Governors of the League:

Round the clock, the Red Cross is on the alert. Its volunteers stand ready, to act whenever there is a need, to relieve suffering in peacetime as in war, and in the day-to-day accidents which occur with such frequency.

On this day dedicated to the Red Cross it is our duty to take stock, to take time to see where we stand and where we are going, to reflect on the profound significance of our constant readiness to help those who suffer, to combat adversity "Round the clock".

The expansion of our movement is a great encouragement: year after year, thousands of newcomers swell the ranks of those whose desire to help others has led them to join an organization which is today the pride of all men of goodwill.

For the Red Cross, "working round the clock" is an expression of faith and confidence in mankind and a heartfelt urge to work for man and to prevent all that can cause him suffering. In short, it signifies respect for others through self-respect; to live and show the way to a better life; to fight against war, death, hunger and destitution; to fight against the fury of the elements; to fight for peace.

We must repeat untiringly that all men, all races and all peoples are duty bound to seek peace through dialogue and understanding; that violence is our main enemy, undermining human dignity, integrity and the elementary rights of the individual. We must combat it in all its forms, wherever it is to be found. We have a heavy responsibility to bear.

Young people must be given the chance to participate in all our activities: the role of adults is to set an example, to give the necessary guidance for those who wish to take a fuller part and assume greater responsibilities in all aspects of Red Cross work.

Indisputably we live in a period of enormous problems and confusion, but when at the same time great strides are being made in the field of technology. If we look to the future with optimism and

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recognize the positive values which are to be found in all men, we can continue to work to ensure the greatest possible well-being for generations to come.

As usual radio and television took part in the celebrations planned in many countries. The League of Red Cross Societies provided more than 70 National Societies and radio stations with recorded magazines, regional programmes, interviews and other material for broadcasts which included messages prepared in close collaboration with the Swiss Broadcasting Corporation and with the help of the European Broadcasting Union. Many television networks, too, celebrated World Day both in their home transmissions and through the Eurovision link or by two-way exchanges of films or documentaries. These exchanges were made possible with the help of the E.B.U.

Finally, the League sent out about 8000 kits containing very well illustrated documentation by means of which both the press and members of National Societies throughout the world were able to play an important part in the general effort to make this year's World Day yet another success.

NURSING ADVISORY COMMITTEE OF LEAGUE MEETS IN GENEVA

Delegates from 14 National Societies in Africa, America, Asia and Europe met at the headquarters of the League of Red Cross Societies in Geneva, from May 11th to 13th, to discuss progress in the field of Red Cross nursing and to plan for better use of these nursing services in the world. The agenda included the major subjects of "Structuring nursing activities within National Societies", "Participation of nurses in national and international emergency relief actions" and "Red Cross and nursing in community health programmes".

The Advisory Committee drew up several recommendations, which will be submitted for the approval of the League's Board of Governors at its next meeting, due to be held in Mexico City from October 12th to 16th. One recommendation expressed the wish that National Societies should train nurses in special duties in case of national and international emergency relief actions, while another stressed the importance of National Societies increasing their nursing activities in the new areas of community development.

Hungary

From 3 to 8 May 1971, Mr. Pierre Gaillard, Assistant Director of the ICRC, was in Hungary on a visit to the Hungarian Red Cross. This was the first time since three years that a similar visit had taken place and it gave Mr. Gaillard the opportunity to meet Professor Gegesi Kiss, its President, Ambassador Rostas, its Secretary General, Dr. Sooky and Dr. Levay, Assistant Secretaries General, Mr. Czivisz, Director of the External Affairs Department and his assistant, Mr. Pasztor.

Mr. Gaillard spoke before the presidium of the Hungarian Red Cross in Budapest and senior officials of the Esztergom Local Branch. The latter has over 21,000 members; moreover, the National Society's significance in the life of the people may be measured by the fact that there are about 800,000 members in the Hungarian Red Cross and about 200,000 in the Junior Red Cross.

At the Ministry of Foreign Affairs, Mr. Gaillard met Dr. Hars, Deputy-Chief of the International Organizations Division, as well as the delegates representing Hungary at the Conference of Government Experts convened by the ICRC, which opened in Geneva on 24 May.

The talks centred mainly on the development of international humanitarian law and on the dissemination of the Geneva Conventions. The Hungarian authorities and the National Society

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attach great importance to both these questions. For its part, the Hungarian Red Cross has already started a campaign to spread knowledge on these matters among members of the army and youth by the publication of three illustrated booklets, and it intends to intensify still more its action.

For World Red Cross Day on 8 May, the National Red Cross Society organized a press conference attended by press, radio and television journalists, in which Mr. Gaillard also took part. He described the work currently pursued by the ICRC, especially in the field of humanitarian law. On this particular occasion, too, he met leaders of the Junior Red Cross of the Budapest 5th district.

M I S C E L L A N E O U S

NURSING SERVICES IN EUROPE: CURRENT TRENDS

A nurse is called upon to take an active part in organizing and analysing the future development of her profession. An article by Miss Nicole F. Exchaquet,¹ from which we reproduce the following extract, is a timely reminder of that fact:

Current trends in nursing services in Europe,—such was the subject discussed by some twenty participants—nurses, doctors, sociologists, research specialists—from ten European countries at a meeting organized, from 16 to 18 December 1970 in Berne, by the Regional European Office of the World Health Organization.

It is, at first glance, a vast subject for so short a meeting. Yet from the outset we found it of absorbing interest, thanks to a series of brief statements in which various speakers set the health services within the economic and social context of present-day Europe. At once this made it clear that our profession's contribution to society cannot be studied in isolation; it has to be viewed in the general framework of the health services available to the population and by close reference to the characteristics of the population. European society is undergoing swift changes through the development of science and technology; it is modifying its methods of production, its organizational structures, its traditional concepts of authority and education. In the industrial, "consumption" society of today the physical and mental resistance of the individual tends to diminish. It is therefore necessary to review the nature of the health services of our countries and the uses to which they are put,

¹ *Revue suisse des infirmières*, Berne, 1971, No. 4.

and to re-examine the contribution made to those services by the medical profession and the ancillary professions. There is likewise need to review the proportion of the national income that is devoted to health; although the proportion is constantly rising, it still cannot meet all the needs of the population. What is to be done in this situation? Should we invest predominantly in the struggle against sickness and in research in pathology, and continue to build and enlarge hospitals? Or should we, on the contrary, devote more funds to preventive services and health education? In what way can we make a rational distribution of our limited resources in nursing staffs?

The participants, working in three groups, sought during a day and a half to define the obstacles that stand in the way of the effective employment of nursing services and in the way of the adaptation of such services to constant changes in science and technology. To this end they closely scrutinized the several areas of the nursing profession: basic training; higher training; practice. We were unanimous in recognizing that tradition has imprisoned the nurse in the limited role of a worker whose physical capacity still takes precedence over intellectual capacity. Nevertheless, she is called upon to undertake activities carrying constantly growing responsibilities—witness the progressive transfer of medical functions to the nursing staff, which, in its turn, hands over a part of its former activities to other auxiliary personnel.

Research has shown that during her career—in which the scope for promotion needs to be broadened—a nurse has to play an administrative role and reveal an aptitude for developing the faculty of judgement and the capacity to take decisions. In the hospital she occupies a key post in the network of communication; she can make a special contribution to diagnostic research and to the administrative aspects of the treatment of patients.

A nurse must nowadays participate in the analysis and assessment of the health services as well as in research into sound health planning at the national level. At the level of government her views should be expressed directly, and no longer through an intermediary. The professional organization, for its part, should take a direct part in the formulation of the general health policy of the country.

What steps should be taken to release nurses from too rigid a framework or too rigid an attitude and to prepare them better for their responsibilities?

Those who took part in the meeting stressed the importance of making use, both in training (basic or higher) and in service, of methods of instruction that stimulate the processes of thought, a critical spirit and the capacity to adjust to constant changes in working situations. They put forward bold proposals for new procedures in respect of recruitment, training and the structural organization of services.

Throughout they laid emphasis on the role of research and on the scope it offers for a sounder analysis of the particular contribution of nursing services within the health services as a whole, for a better use of existing resources, and for a re-examination of the profession designed to adapt it to the developing status of women...

JUVENILE MALADJUSTMENT

The topical nature and importance of the juvenile maladjustment problem in many countries is well known. Because it engenders in youth a feeling of human fellowship and awakens in them greater consideration for others, the Red Cross goes some way to providing a remedy. But the problem, whilst it involves education, morality and sometimes medicine, has also social roots, as shown by Dr. W. Bettschart in an article entitled Juvenile Maladjustment—The Individual and Society¹ from which we quote the following extracts:

The current upheaval of social structures leads us to consider juvenile adjustment and maladjustment and all that this implies. Taboos, often of a secular nature, are transgressed, the distinctions between legality and illegality change, political and economic concepts are questioned and traditions which used to provide security, and which were considered immutable, are abolished. At a time when technology and scientific progress are leading to ever greater specialization, to increasingly thoroughgoing and

¹ See *International Child Welfare Review*, Geneva, Feb. 1971.

MISCELLANEOUS

specific fields of knowledge, we are coming to realise that group or team work is becoming increasingly necessary, and that a contradictory need is arising for ever greater individualization offset by the need to give up certain individual prerogatives. The individual strives for more authentic personal fulfilment both in his professional and in his private life. Faced with economic needs and social realities which are brought home to him by mass media, he must subscribe to a sense of cohesion and a broader form of joint responsibility. In this world with its contradictions and changes, everyone is aware that man cannot be this "zoon politikon", this naturally sociable being that the philosophers of Ancient Greece considered to be the ideal.

Is it the individual or society that is maladjusted? The individual proclaiming his freedom or society trying to preserve its traditional opinions? Is the individual overstepping the line laid down by society or by the community, or is society fraught with certain structures which inhibit the development of the individual? This is a delicate subject which, from the outset, involves us in a difficult dialectic involving consideration of the reciprocal relationships between the individual and society, wherein a number of interests and stresses interact. This is an emotionally explosive subject which concerns the most intimate of personal convictions. How can we draw the line between the manifestations of maladjustment and the structure of the personality, how can we conciliate jurisprudence, psychiatry, education and upbringing, how are we to consider the persons responsible for maintaining law and order and public safety and those who defend their personal interests?...

...First, we should point out that "society" makes an easy target for projection. It is accused of all sorts of mistakes, it is held responsible for all manner of problems. The process is easily discerned, yet it is nevertheless in current use. The individual can, by using this device, eliminate his own problems by foisting on to others whatever he finds unpleasant. This is one of the crossroads at which we must each take our own decision, either to unload our responsibility on to society or to feel partly responsible for the maladjustment. Which are we to choose? Even the best equipped of societies can do nothing to forearm and help the maladjusted

unless each member of that society feels that he is implicated and involved.

The discussion becomes more concrete if, instead of speaking of society, we refer to social structures. Here we shall simply list the dangers which await social administrations which are responsible for maladjusted young people and the education system. It would obviously be too easy to sit in judgement on the social services, so we shall just mention a few facts. Owing to the importance of the administrative side of these services, the public authorities tend to entrust these functions to administrators or technicians. Instead of remaining a co-ordination and planning centre, a setting in which the workers can practise their profession on a one-to-one basis with the maladjusted person, these services are tending to become organizations with their own rules and regulations. Personal and flexible contact with the patient, infused with personal responsibility, is replaced by the file, the visible expression of "a job well done". The application of a doctrine is preferred to multi-disciplinary team-work where fundamentals are continually being questioned.

Mention should also be made of the "asocialising" concepts of certain teaching methods. Most of the time, classes are too big and therefore the teacher-child relationship is mainly of a disciplinary nature. The teacher consequently refuses to play a truly educational role and simply concentrates on transmitting his knowledge. The accent is laid solely on academic success. Instead of helping the child to discover the value of co-operation by working in small groups, he is stimulated by competitions and marks which awaken a sense of rivalry among the pupils. How can we be surprised if children become maladjusted? Schools really must once again find their vocation, that of education and training in the broadest sense. By teaching on a more personal basis adapted to the knowledge and degree of maturation reached by each pupil and by exploiting the pupils' own co-operation, school could become an exciting place where the children would learn about human relations and how really to make contact. Similarly, an end must be put to the segregationist practice of geographically separating special and specialized classes from ordinary classes. Cohabitation would go a long way towards facilitating mutual understanding.

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Many workers, with one eye on the maladjusted individual and the other on our maladjusted society, feel committed both to the work they have to do with their patient and to public life and society. They consider the public insufficiently informed and the tools, put in their hands for "socialising" the young, inadequate and insufficient, and they feel that any improvement would presuppose the active participation of the worker in public and political affairs. How are we to understand socialization? First, we could say, defining it negatively, that it is not a question of "normalising" the individual, of wanting to make him toe the line, of giving him orders. The educational aim is to help the individual to mature thereby allowing him to live as harmoniously as possible, striking a balance between personal fulfilment and an acceptance of the facts of society. This idea of socialization does not always prove possible. We have often to resign ourselves to propping up the situation. The aim, however, is the same and that is to teach the maladjusted person the art of living, to work with him to find the path best suited to him and to strive for his development. Neither the worker nor the maladjusted person can avoid the difficult struggle between personal desires and external demands. The maladjusted person must be accepted and loved for what he is and, at the same time, socialised, that is, changed. The young person must be able to decide freely, whereas the worker must guide him until he reaches the necessary emotional maturity. Firmness and resolve are necessary at times, freedom and indulgence at others. Such flexibility calls for rich personalities who fully understand their inner selves and their relations with others. The self-confidence and capability of a worker depend on a solid training, possibilities for further training and supervision when working. In this way he will be able to live and work through the difficult problems that his client will be trying to solve....

...Social institutions will never be able to be anything other than a framework. The prevention and treatment of maladjustment will always be related to persons who feel themselves responsible for others. Direct contact will always be essential in combating maladjustment, this problem inherent in our existence which derives its true meaning from human relations.

BOOKS AND REVIEWS

HENRI MEYROWITZ: « LE PRINCIPE DE L'ÉGALITÉ
DES BELLIGÉRANTS DEVANT LE DROIT DE LA GUERRE »¹

Positive international law being no longer indifferent to licit or illicit recourse to force, the question arises: has the changed *jus ad bellum* influenced the *jus in bello*? Defending the latter's independence of the former, and in the light of the persistence of the principle of equality of belligerents in the law of war, Mr. Meyrowitz, one of whose important studies was published recently in *International Review*, reveals the various realms of international law by introducing the reader to a wide choice of writings on the law of war.

The critical examination of the prevailing law, of works and publications on the subject, is the main purpose of his book and takes up 412 pages. The comments are not only on questions to which the examination of the main theme gives rise; the austerity of the subject is relieved by many considerations.

There are three main parts to the book, with the following titles:

1. *le principe de l'égalité des belligérants en droit positif*;
2. *le fondement et la délimitation du principe de l'égalité des belligérants devant le droit de la guerre*;
3. *l'état agresseur et le droit de la neutralité*.

The author devotes special attention to the problems of equality between belligerents within the framework of the United Nations. According to him, the maintenance of the principle of equality is demanded by the principles which are the very basis of the law of war and whose value is undiminished by the new rule forbidding

¹ Editions A. Pédone, Paris, 1970.

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war of aggression (*a*—principle of civilisation; *b*—principle of humanity; *c*—principle of international public order).

The four 1949 Geneva Conventions are frequently called the “humanitarian Conventions”. In Mr. Meyrowitz’ opinion, that denomination is not official. In the Conventions, the adjective “humanitarian” is used to qualify the character or mission of the ICRC or of any other impartial humanitarian body or to qualify the activities of medical teams and units, civilian hospitals and relief organizations.

The word “humanitarian” in the Conventions, therefore, has a specific and limited meaning. The expression “the interests of mankind” is used objectively and contrasts with the term “humanitarian motives” used by the Institute of International Law and in which subjectivity appears to be the dominant factor (p. 134). In all the provisions of the Geneva Conventions, it is impossible to isolate intellectually and in practice the “humanitarian” element.

The author considers that formal accession to the Geneva Conventions by the United Nations, or an equivalent declaration on its part, would be timely, and he points out that accession to the Conventions by the United Nations would not be of a “constitutive” character but only “declarative”.

As regards the principle of humanity, the author underlines two ideas which are closely linked: that which observes, appreciates and affirms the unity of the human race, and that—purely prescriptive—of human behaviour. In both, the principle of humanity emerges free of all subjectivism. For neither of these ideas does the adjective “humanitarian” relate to the substantive “mankind”.

Are the humanitarian rules inspired by the principle of humanity? Do they serve that principle? According to pages 253-254, “this principle is not limited to those rules commonly called humanitarian. . . ; the true function of the principles of humanity is protection against barbarity, bestiality and the degrading of man”.

Pointing out that the object of the law of neutrality was so far almost exclusively the protection of interests and not, like the law of war, of values, the author argues that any protective institution or statute under the law of war and the law of neutrality has

a complex object. The concept "protected persons" or "protected property" expresses but a half-truth for, to the extent that the law of war protects persons or property, it also protects the belligerent enemy of the State to which those persons and that property belong.

It serves the law of war because it serves the objective of that law, its humanizing and civilizing design, which it achieves by regulating and limiting violence and by facilitating the restoration of peace. The author states on pages 391-392 that the statute protects neutrals and belligerents equally by forbidding both from committing acts which are directly or indirectly belligerent towards each other. It protects neutrality itself and neutrality's primary objective, that is to say the elimination of violence and the restoring of peace.

J. H. P.

MARIE-ANTOINETTE RUPP: «LE SERVICE SOCIAL
DANS LA SOCIÉTÉ FRANÇAISE D'AUJOURD'HUI»

For some years social workers have observed the continual transformation of their profession, and an overall view such as is to be found in this book is particularly interesting. It prompts us to enquire into the profound significance of their daily task and it is likely to become widely known among such constant interlocutors of social services as administrators, industrialists, doctors, psychologists, educators and youth leaders and although the author is concerned only with France, she in fact analyses the present forms of western society and refers to them to understand and make understood the social service role.

The *raison d'être* of social service fifty years ago—welfare assistance, protection of the weak and unadapted—is still the major activity. But economic and social evolution—industrialization and urbanization — far from making the social worker's

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job easier has made it more complicated and varied. Their training, formerly hospital, legal and administrative, relies more and more on the social sciences.

Explaining future trends in social service, Mrs. Rupp considers that soon it will be taken over by technicians, the "caseworkers" and the "groupworkers", community leaders, social administrators and specialists in social research. She concludes with the following passage showing the importance she attaches to human dignity, which it is the social service's objective to develop among the people with whom it is concerned:

"Let us not forget the main principles underlying social work: respect for other persons' rights to aspire to a better economic, social and cultural level, limited only by the criterion of the common good; respect for the freedom of others to decide their objectives and to develop and select the theoretical and practical means thereto; respect for other people whatever their cultural or social peculiarities or former failures; the contribution of each person to his own development; the desire of each person to repay other members of the community for services received, as soon as it is possible to do so"¹.

J.-G. L.

PAQUERETTE VILLENEUVE: «EDUQUER LES ENFANTS DÉFICIENTS»²

Under this title, the author gives a historical and practical outline of the efforts undertaken to educate handicapped children, both young and old, and to develop in them "the feeling that the human community is not barred to them". Only a specialized educator can guide defenceless beings towards the acquisition of those faculties through the exercise of which they will, slowly

¹ Our translation.

² Published by UNESCO, Paris, 1970, 80 pages.

but surely, succeed in breaking out of their prison and go forward towards their fellow-creatures to live the same way as they do.

Up to the end of the XIXth century, only a few eminent souls scattered here and there, had concerned themselves with the problems arising from various infirmities, more particularly lack of sight or of hearing. But, early in the XXth century, people full of zeal and goodwill started to band themselves together with the aim of studying ways and means of educating handicapped children and preparing them as fully as possible for life ahead. The education of handicapped persons, however, required a different method than that employed for normal schooling.

The author indicates one after the other some of the tasks, which differ according to the case, that the specialist must carry out for the deaf, blind, maimed and the mentally deficient, and how these teaching techniques, which call for much patience and widely different acquirements, vary with the countries concerned. From this account, one can understand " that such an undertaking is fully justified, for the results obtained in this pioneer work not only benefit the handicapped themselves who, for being better armed for life, will become a lesser burden upon the community, but also allow us to obtain a better knowledge of child psychology and often open up new horizons to general education, aimed at the entire school population ".

J.-G. L.

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The UNRWA/UNESCO education programme. *UNESCO Chronicle*, Paris, 1971, No. 3.

... One of the most useful tasks performed by UNRWA is to provide education and training which enable young refugees to serve their community. Despite the disadvantages of their refugee status—or perhaps because of it—these young people are intelligent and adaptable, eager to learn and ready to seize any chance life may offer them. They are growing up in an age of social change and technological development in the Arab world, an environment in which education is the key to success and advancement, and can to a great extent compensate for their initial handicap.

Since 1950, education services have been provided jointly by UNRWA and UNESCO, the latter being responsible for technical aspects of the programme which is financed and administered by UNRWA. Twenty years ago, the task of educating the children and young people of the Arab refugee population in the areas bordering on their homeland in Palestine began in conditions of great difficulty. Classes were held in the open air, in tents or in rented premises with such furniture, equipment and teaching aids as were available. Few of the teachers engaged in those days had any previous experience or training. The budget for education, during the first year, was \$400,000.

By 1970, the education programme had become the agency's main activity absorbing \$21,600,000 or 45% of the budget. During the 1969-1970 school year, UNRWA provided education and training for 289,959 young people out of a total registered refugee population of 1,409,659, whereas in 1966-1967 the figure was 254,500 out of a total population of 1,330,077 registered refugees...

Medicine, Health, and Government : The Future Outlook, by Sir John Charles, *WHO Chronicle*, Geneva, No. 9.

There is another great problem which concerns developed and developing countries alike—the need to train the various types of auxiliary—some professional, others with multiple or even single skills—who make up the modern medical team both in the hospital and in the field. In developed countries, the need arises from the increased complexity of medicine and the heavy demands for the skilled personnel required by advanced medical and surgical techniques. In developing countries, it reflects the stark fact that for many years to come the fully

trained medical practitioner and other co-operating professionals such as nurses, dentists, and engineers will be in very short supply. If an effective attempt is to be made to provide some form of medical care to 100% of the population, and this is undoubtedly the ultimate objective, the professionals must be spread very thin indeed, and in addition there must be the most carefully organized use of their time, energies, and skills.

This can be done only through the extensive use of auxiliaries at various levels of education and expertise. Unfortunately there still survives in some developing countries an idea that the employment of auxiliaries is a stigma of inferiority, and that "only physicians can evaluate and treat the sick". According to a recent study by a Rockefeller Foundation team, *Health and the Developing World*, "this conflict arises from the near mystical quality that history and culture have given to the relationship between the physician and his patient".

The fixation may continue for some time yet, but the available evidence suggests that it is weakening, and that the auxiliary is increasingly regarded as the foundation upon which health and medical care in developing countries can be most effectively established. Furthermore, the training of auxiliaries, simple and *ad hoc* though it may be, is receiving particular attention.

The growing recognition of the importance of the health team is seen in the pioneering attempts to obtain the conjoined and contemporaneous education and training of some of its members. The recently established University Centre for Health Sciences at Yaoundé in Cameroon, where doctors, dentists, nurses, and midwives participate in the same courses of instruction and together climb up the educational ladder to their appropriate level, is an example of the constructive thought and practical experimentation which characterize the educational activities of many developing countries. It is an experiment which will undoubtedly be repeated.

Life-long education, by Malcolm S. Adiseshiah, *I. E. Y.—UNESCO*, Paris, 1970, No. 7.

... Indeed, I am certain that the concept of life-long education would have never been formed as an original approach but for the tremendous expansion of adult education which took place in the course of the last decades in some of the more developed countries, like the Scandinavian countries, United Kingdom, the Soviet Union, Czechoslovakia, Canada, France, to quote only a few of them, and in the developing countries, more recently, in the form of literacy cam-

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paigns and community development. In both situations, the rapid expansion of adult education reflects the thirst for knowledge which is inseparable from the claim for human dignity and the gradual development of democracy, and from the recognition of the rôle of education as a means of achieving them.

While adult education concentrated mainly on providing a substitute for the lack of schooling or inadequate schooling of the less privileged groups, it was soon faced with the necessity of developing a new pedagogy, based on the simple fact that adults, poor in formal knowledge as they are, but often rich in experience, and involved in the many responsibilities of life, cannot be taught as children. Adult education soon became a new type of education in its own right—no longer a substitute—which questioned the formal approach to teaching, relied more on motivation, and attempted to bring the content of education nearer to life. Then adult education received a new impetus from the fact that the ever increasing prestige of education, as a factor of social promotion, combined with the need for an ever greater volume of knowledge, which educational systems recognized by steadily extending the duration of compulsory schooling. The increased duration of school education and the demand for more adult education which increased simultaneously had a cumulative effect and combined into the notion that the education period, instead of being restricted to school age, coincided with the whole life...

EXTRACT FROM THE STATUTES OF
THE INTERNATIONAL COMMITTEE OF THE RED CROSS

(AGREED AND AMENDED ON SEPTEMBER 25, 1952)

ART. 1. — The International Committee of the Red Cross (ICRC) founded in Geneva in 1863 and formally recognized in the Geneva Conventions and by International Conferences of the Red Cross, shall be an independent organization having its own Statutes.

It shall be a constituent part of the International Red Cross.¹

ART. 2. — As an association governed by Articles 60 and following of the Swiss Civil Code, the ICRC shall have legal personality.

ART. 3. — The headquarters of the ICRC shall be in Geneva.

Its emblem shall be a red cross on a white ground. Its motto shall be "Inter arma caritas".

ART. 4. — The special role of the ICRC shall be:

- (a) to maintain the fundamental and permanent principles of the Red Cross, namely: impartiality, action independent of any racial, political, religious or economic considerations, the universality of the Red Cross and the equality of the National Red Cross Societies;
- (b) to recognize any newly established or reconstituted National Red Cross Society which fulfils the conditions for recognition in force, and to notify other National Societies of such recognition;

¹ The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term "National Red Cross Societies" includes the Red Crescent Societies and the Red Lion and Sun Society.

- (c) to undertake the tasks incumbent on it under the Geneva Conventions, to work for the faithful application of these Conventions and to take cognizance of any complaints regarding alleged breaches of the humanitarian Conventions;
- (d) to take action in its capacity as a neutral institution, especially in case of war, civil war or internal strife; to endeavour to ensure at all times that the military and civilian victims of such conflicts and of their direct results receive protection and assistance, and to serve, in humanitarian matters, as an intermediary between the parties;
- (e) to contribute, in view of such conflicts, to the preparation and development of medical personnel and medical equipment, in co-operation with the Red Cross organizations, the medical services of the armed forces, and other competent authorities;
- (f) to work for the continual improvement of humanitarian international law and for the better understanding and diffusion of the Geneva Conventions and to prepare for their possible extension;
- (g) to accept the mandates entrusted to it by the International Conferences of the Red Cross.

The ICRC may also take any humanitarian initiative which comes within its role as a specifically neutral and independent institution and consider any questions requiring examination by such an institution.

ART. 6 (first paragraph). — The ICRC shall co-opt its members from among Swiss citizens. The number of members may not exceed twenty-five.



H. Ritschard & Cie. S.A.

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- AFGHANISTAN — Afghan Red Crescent, *Kabul*.
- ALBANIA — Albanian Red Cross, 35, Rruga e Barrikadavet, *Tirana*.
- ALGERIA — Central Committee of the Algerian Red Crescent Society, 15 bis, Boulevard Mohamed V, *Algiers*.
- ARGENTINE — Argentine Red Cross, H. Yrigoyen 2068, *Buenos Aires*.
- AUSTRALIA — Australian Red Cross, 122-128 Flinders Street, *Melbourne, C. 1*.
- AUSTRIA — Austrian Red Cross, 3 Gusshausstrasse, Postfach 39, *Vienna IV*.
- BELGIUM — Belgian Red Cross, 98, Chaussée de Vleurgat, *Brussels 5*.
- BOLIVIA — Bolivian Red Cross, Avenida Simon Bolivar, 1515 (Casilla 741), *La Paz*.
- BOTSWANA — Botswana Red Cross Society, P.O. Box 485, *Gaborone*.
- BRAZIL — Brazilian Red Cross, Praça da Cruz Vermelha 12 zc/86, *Rio de Janeiro*.
- BULGARIA — Bulgarian Red Cross, 1, Boul. S. S. Biruzov, *Sofia*.
- BURMA — Burma Red Cross, 42, Strand Road, Red Cross Building, *Rangoon*.
- BURUNDI — Red Cross Society of Burundi, rue du Marché 3, P.O. Box 324, *Bujumbura*.
- CAMEROON — Central Committee of the Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, *Yaoundé*.
- CANADA — Canadian Red Cross, 95 Wellesley Street, East, *Toronto 284* (Ontario).
- CEYLON — Ceylon Red Cross, 106 Dharmapala Mawatha, *Colombo VII*.
- CHILE — Chilean Red Cross, Avenida Santa Maria 0150, Correo 21, Casilla 246V., *Santiago de Chile*.
- CHINA — Red Cross Society of China, 22 Kanmien Hutung, *Peking, E*.
- COLOMBIA — Colombian Red Cross, Carrera 7a, 34-65 Apartado nacional 1110, *Bogota D.E.*
- CONGO — Red Cross of the Congo, 41, Avenue Valcke P.O. Box 1712, *Kinshasa*.
- COSTA RICA — Costa Rican Red Cross, Calle 5a, Apartado 1025, *San José*.
- CUBA — Cuban Red Cross, Calle 23 201 esq. N. Vedado, *Havana*.
- CZECHOSLOVAKIA — Czechoslovak Red Cross, Thunovska 18, *Prague I*.
- DAHOMY — Red Cross Society of Dahomey, P.O. Box 1, *Porto Novo*.
- DENMARK — Danish Red Cross, Ny Vestergade 17, *Copenhagen K*.
- DOMINICAN REPUBLIC — Dominican Red Cross, Calle Juan Enrique Dunant, Ensanche Miraflores, *Santo Domingo*.
- ECUADOR — Ecuadorian Red Cross, Calle de la Cruz Roja y Avenida Colombia 118, *Quito*.
- ETHIOPIA — Ethiopian Red Cross, Red Cross Road No. 1, P.O. Box 195, *Addis Ababa*.
- FINLAND — Finnish Red Cross, Tehtaankatu 1 A, Box 14168, *Helsinki 14*.
- FRANCE — French Red Cross, 17, rue Quentin Bauchart, *Paris (8^e)*.
- GERMANY (Dem. Republic) — German Red Cross in the German Democratic Republic, Kaizerstrasse 2, *Dresden A. 1*.
- GERMANY (Federal Republic) — German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, 5300 *Bonn 1*, Postfach (D.B.R.).
- GHANA — Ghana Red Cross, P.O. Box 835, *Accra*.
- GREAT BRITAIN — British Red Cross, 9 Grosvenor Crescent, *London, S.W.1*.
- GREECE — Hellenic Red Cross, rue Lycavittou 1, *Athens 135*.
- GUATEMALA — Guatemalan Red Cross, 3.^a Calle 8-40 zona 1, *Guatemala C.A.*
- GUYANA — Guyana Red Cross, P.O. Box 351, Eve Leary, *Georgetown*.
- HAITI — Haiti Red Cross, Place des Nations Unies, B.P. 1337, *Port-au-Prince*.
- HONDURAS — Honduran Red Cross, Calle Henry-Dunant 516, *Tegucigalpa*.
- HUNGARY — Hungarian Red Cross, Arany Janos utca 31, *Budapest V*.
- ICELAND — Icelandic Red Cross, Øldugøtu 4, Post Box 872, *Reykjavik*.
- INDIA — Indian Red Cross, 1 Red Cross Road, *New Delhi 1*.
- INDONESIA — Indonesian Red Cross, Djalan Abdulmuhs 66, P.O. Box 2009, *Djakarta*.
- IRAN — Iranian Red Lion and Sun Society, Avenue Ark, *Teheran*.
- IRAQ — Iraqi Red Crescent, Al-Mansour, *Baghdad*.
- IRELAND — Irish Red Cross, 16 Merrion Square, *Dublin 2*.
- ITALY — Italian Red Cross, 12, via Toscana, *Rome*.
- IVORY COAST — Ivory Coast Red Cross Society, B.P. 1244, *Abidjan*.
- JAMAICA — Jamaica Red Cross Society, 76 Arnold Road, *Kingston 5*.
- JAPAN — Japanese Red Cross, 5 Shiba Park, Minato-Ku, *Tokyo 105*.
- JORDAN — Jordan National Red Crescent Society, P.O. Box 10 001, *Amman*.
- KENYA — Kenya Red Cross Society, St Johns Gate, P.O. Box 712, *Nairobi*.
- KHMER REPUBLIC — Khmer Red Cross, 17, Vithei Croix-Rouge khmère, P.O.B. 94, *Phnom-Penh*.
- KOREA (Democratic People's Republic) — Red Cross Society of the Democratic People's Republic of Korea, *Pyongyang*.
- KOREA (Republic) — The Republic of Korea National Red Cross, 32-3 Ka Nam San-Donk, *Seoul*.
- KUWAIT — Kuwait Red Crescent Society, P.O. Box 1359, *Kuwait*.
- LAOS — Lao Red Cross, P.B. 650, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Général Spears, *Beirut*.

ADDRESSES OF NATIONAL SOCIETIES

- LIBERIA** — Liberian National Red Cross, National Headquarters, 13th Street-Sinkor, P.O. Box 226, *Monrovia*.
- LIBYAN ARAB REPUBLIC** — Libyan Red Crescent, Berka Omar Mukhtar Street, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN** — Liechtenstein Red Cross, FL-9490 *Vaduz*.
- LUXEMBOURG** — Luxembourg Red Cross, Parc de la Ville, C.P. 234, *Luxembourg*.
- MADAGASCAR** — Red Cross Society of Madagascar, rue Clemenceau, P.O. Box 1168, *Tananarive*.
- MALAWI** — Malawi Red Cross, Hall Road, Box 247, *Blantyre*.
- MALAYSIA** — Malaysian Red Cross Society, 519 Jalan Belfield, *Kuala Lumpur*.
- MALI** — Mali Red Cross, B.P. 280, route de Koulikora, *Bamako*.
- MEXICO** — Mexican Red Cross, Avenida Ejército Nacional, n° 1032, *Mexico* 10, D.F.
- MONACO** — Red Cross of Monaco, 27, boul. de Suisse, *Monte-Carlo*.
- MONGOLIA** — Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, *Ulan Bator*.
- MOROCCO** — Moroccan Red Crescent, rue Benzakour, B.P. 189, *Rabat*.
- NEPAL** — Nepal Red Cross Society, Tripureswar, P.B. 217, *Kathmandu*.
- NETHERLANDS** — Netherlands Red Cross, 27 Prinsessegracht, *The Hague*.
- NEW ZEALAND** — New Zealand Red Cross, 61 Dixon Street, P.O.B. 6073, *Wellington* C.2.
- NICARAGUA** — Nicaraguan Red Cross, 12 Avenida Noroeste, 305, *Managua*, D.N.
- NIGER** — Red Cross Society of Niger, B.P. 386, *Niamey*.
- NIGERIA** — Nigerian Red Cross Society, Eko Akete Close, off. St. Gregory Rd., Onikan, P.O. Box 764, *Lagos*.
- NORWAY** — Norwegian Red Cross, Parkveien 33b, *Oslo*.
- PAKISTAN** — Pakistan Red Cross, Dr Dawood Pota Road, *Karachi* 4.
- PANAMA** — Panamanian Red Cross, Apartado 668, Zona 1, *Panama*.
- PARAGUAY** — Paraguayan Red Cross, calle André Barbero y Artigas 33, *Asunción*.
- PERU** — Peruvian Red Cross, Jiron Chancay 881, *Lima*.
- PHILIPPINES** — Philippine National Red Cross, 860 United Nations Avenue, P.O.B. 280, *Manila* D-406.
- POLAND** — Polish Red Cross, Mokotowska 14, *Warsaw*.
- PORTUGAL** — Portuguese Red Cross, General Secretaryship, Jardim 9 de Abril, 1 a 5, *Lisbon* 3.
- RUMANIA** — Red Cross of the Socialist Republic of Rumania, Strada Biserica Amzei 29, *Bucarest*.
- SALVADOR** — Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente 21, *San Salvador*.
- SAN MARINO** — San Marino Red Cross, Palais gouvernemental, *San Marino*.
- SAUDI ARABIA** — Saudi Arabian Red Crescent, *Riyadh*.
- SENEGAL** — Senegalese Red Cross Society, Bld. Franklin-Roosevelt, P.O.B. 299, *Dakar*.
- SIERRA LEONE** — Sierra Leone Red Cross Society, 6 Liverpool Street, P.O.B. 427, *Freetown*.
- SOMALI REPUBLIC** — Somali Red Crescent Society, P.O. Box 937, *Mogadiscio*.
- SOUTH AFRICA** — South African Red Cross, Cor. Kruis & Market Streets, P.O.B. 8726, *Johannesburg*.
- SPAIN** — Spanish Red Cross, Eduardo Dato 16, *Madrid*, 10.
- SUDAN** — Sudanese Red Crescent, P.O. Box 235, *Khartoum*.
- SWEDEN** — Swedish Red Cross, Artillerigatan 6, 10440, *Stockholm* 14.
- SWITZERLAND** — Swiss Red Cross, Taubenstrasse 8, B.P. 2699, 3001 *Berne*.
- SYRIA** — Syrian Red Crescent, Bd Mahdi Ben Barake, *Damascus*.
- TANZANIA** — Tanganyika Red Cross Society, Upanga Road, P.O.B. 1133, *Dar es Salaam*.
- THAILAND** — Thai Red Cross Society, King Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO** — Togolese Red Cross Society, Avenue des Alliés 19, P.O. Box 655, *Lomé*.
- TRINIDAD AND TOBAGO** — Trinidad and Tobago Red Cross Society, 48 Pembroke Street, P.O. Box 357, *Port of Spain*.
- TUNISIA** — Tunisian Red Crescent, 19, rue d'Angleterre, *Tunis*.
- TURKEY** — Turkish Red Crescent, Yenisehir, *Ankara*.
- UGANDA** — Uganda Red Cross, Nabunya Road, P.O. Box 494, *Kampala*.
- UNITED ARAB REPUBLIC** — Red Crescent Society of the United Arab Republic, 34, rue Ramses, *Cairo*.
- UPPER VOLTA** — Upper Volta Red Cross, P.O.B. 340, *Ouagadougou*.
- URUGUAY** — Uruguayan Red Cross, Avenida 8 de Octubre, 2990, *Montevideo*.
- U.S.A.** — American National Red Cross, 17th and D Streets, N.W., *Washington* 6 D.C.
- U.S.S.R.** — Alliance of Red Cross and Red Crescent Societies, Tcheremushki, J. Tcheremushkinskii proezd 5, *Moscow* W-36.
- VENEZUELA** — Venezuelan Red Cross, Avenida Andrés Bello No. 4, Apart. 3185, *Caracas*.
- VIET NAM (Democratic Republic)** — Red Cross of the Democratic Republic of Viet Nam, 68, rue Bà-Triệu, *Hanoi*.
- VIET NAM (Republic)** — Red Cross of the Republic of Viet Nam, 201, duong Hồng-Thập-Tu, No. 201, *Saigon*.
- YUGOSLAVIA** — Yugoslav Red Cross, Simina ulica broj 19, *Belgrade*.
- ZAMBIA** — Zambia Red Cross, P.O. Box R.W.1., Ridgeway, *Lusaka*.